

## APPLICATION DATA SHEET

### Application Information

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?::

Number of Copies of CRF::

Title:: PESTICIDAL PYRIDINECARBOXAMIDE DERIVATIVES

Attorney Docket Number:: 033495-017

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?::

### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Koichi

Middle Name::

Family Name:: ARAKI

Name Suffix::

City of Residence:: Ibaraki

State or Province of Residence::

Country of Residence:: Japan

Street of Mailing Address:: 2-4-39, Kamiya Ushiku

City of Mailing Address:: Ibaraki

State or Province of Mailing Address::

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 300-1216

## **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Tetsuya

Middle Name::

Family Name:: MURATA

Name Suffix::

City of Residence:: Ibaraki

State or Province of Residence::

Country of Residence:: Japan

Street of Mailing Address:: 1-19-10, Chuo Ushiku

City of Mailing Address:: Ibaraki

State or Province of Mailing Address::

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 300-1234

## **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Koshi

Middle Name::

Family Name:: GUNJIMA

Name Suffix::

City of Residence:: Yachiyo City, Chiba

State or Province of Residence::

Country of Residence:: Japan

Street of Mailing Address:: 4-2-3-303, Yachiyomidorigaoka,

City of Mailing Address:: Yachiyo City, Chiba

State or Province of Mailing Address::

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 276-0049

## **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Norihiko

Middle Name::

Family Name:: NAKAKURA

Name Suffix::

City of Residence:: Tochigi

State or Province of Residence::

Country of Residence:: Japan

Street of Mailing Address:: 3-2-7-503 Gion, Minamikawachi-machi

City of Mailing Address:: Tochigi

State or Province of Mailing Address::

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 329-0434

## **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Eiichi

Middle Name::

Family Name:: SHIMOJO

Name Suffix::

City of Residence:: Tochigi

State or Province of Residence::

Country of Residence:: Japan

Street of Mailing Address:: 4-16-1 Nishijyonan Oyama

City of Mailing Address:: Tochigi

State or Province of Mailing Address::

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address::

## **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: United Kingdom

Status:: Full Capacity

Given Name:: Dale

Middle Name:: Robert

Family Name:: MITCHELL

Name Suffix::

City of Residence:: Great Chesterford, Essex

State or Province of Residence::

Country of Residence:: United Kingdom

Street of Mailing Address:: 3 St. John's Close

City of Mailing Address:: Great Chesterford, Essex

State or Province of Mailing Address::

Country of Mailing Address:: United Kingdom

Postal or Zip Code of Mailing Address:: CB 10 1PB

## **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: The Netherlands

Status:: Full Capacity

Given Name:: Henricus

Middle Name:: Maria Martinus

Family Name:: BASTIAANS

Name Suffix::

City of Residence:: Usingen

State or Province of Residence::

Country of Residence:: Germany

Street of Mailing Address:: Bartolomaeus-Arnoldi-Strasse 35

City of Mailing Address:: Usingen

State or Province of Mailing Address::

Country of Mailing Address:: Germany

Postal or Zip Code of Mailing Address:: 61250

## **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: United Kingdom

Status:: Full Capacity

Given Name:: David

Middle Name:: Stephen

Family Name:: CARVER

Name Suffix::

City of Residence:: Lyon

State or Province of Residence::

Country of Residence:: France

Street of Mailing Address:: 38, rue Malesherbes

City of Mailing Address:: Lyon

State or Province of Mailing Address::

Country of Mailing Address:: France

Postal or Zip Code of Mailing Address:: F-69006

## **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: United Kingdom

Status:: Full Capacity

Given Name:: Daniel

Middle Name::

Family Name:: ALLEN

Name Suffix::

City of Residence:: Linton, Cambs

State or Province of Residence::

Country of Residence:: United Kingdom

Street of Mailing Address:: 17 Tower View

City of Mailing Address:: Linton, Cambs

State or Province of Mailing Address::

Country of Mailing Address:: United Kingdom

Postal or Zip Code of Mailing Address:: CB 16LL

## **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Germany

Status:: Full Capacity

Given Name:: Christian

Middle Name::

Family Name:: ARNOLD

Name Suffix::

City of Residence:: Adendorf

State or Province of Residence::

Country of Residence:: Germany

Street of Mailing Address:: Grimmersdorfer Weg 11

City of Mailing Address:: Adendorf

State or Province of Mailing Address::

Country of Mailing Address:: Germany

Postal or Zip Code of Mailing Address:: 53343

## **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Germany

Status:: Full Capacity

Given Name:: Waltraud

Middle Name::

Family Name:: HEMPEL

Name Suffix::

City of Residence:: Liederbach

State or Province of Residence::

Country of Residence:: Germany

Street of Mailing Address:: Zum Morgengraben 18

City of Mailing Address:: Liederbach

State or Province of Mailing  
Address::

Country of Mailing Address:: Germany

Postal or Zip Code of Mailing  
Address:: 65835

## **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Germany

Status:: Full Capacity

Given Name:: Olga

Middle Name::

Family Name:: MALSAM

Name Suffix::

City of Residence:: Bonn

State or Province of Residence::

Country of Residence:: Germany

Street of Mailing Address:: Berghovener Strasse 67

City of Mailing Address:: Bonn

State or Province of Mailing  
Address::

Country of Mailing Address:: Germany

Postal or Zip Code of Mailing  
Address:: 53227

## **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Germany

Status:: Full Capacity

Given Name:: Jutta

Middle Name:: Maria

Family Name:: WAIBEL

Name Suffix::

City of Residence:: Frankfurt

State or Province of Residence::

Country of Residence:: Germany

Street of Mailing Address:: Manderscheider Strasse 51

City of Mailing Address:: Frankfurt

State or Province of Mailing Address::

Country of Mailing Address:: Germany

Postal or Zip Code of Mailing Address:: 60529

## **Correspondence Information**

Correspondence Customer Number:: 21839

Phone Number:: (703) 836-6620

Fax Number:: (703) 836-2021

## **Representative Information**

Representative Customer Number:: 21839

## **Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application:: Parent Filing Date::</b>
This Application	National Stage of	PCT/EP03/04715 05/06/03

## **Foreign Priority Information**

<b>Country::</b>	<b>Application Number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>
EP	02010911.2	05/16/02	Yes

## **Assignee Information**

Assignee Name::	Bayer CropScience GmbH
Street of Mailing Address::	Brüningstrasse 50
City of Mailing Address::	Frankfurt
State or Province of Mailing Address::	
Country of Mailing Address::	Germany
Postal or Zip Code of Mailing Address::	65926